UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

MEDICAL COMPONENTS, INC.

Plaintiff(s)

v.

C.R. BARD, INC.
BARD PERIPHERAL VASCULAR, INC.
AND
BARD ACCESS SYSTEMS, INC.

Defendant(s)

Civil Action No. 6:17cv237

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* BARD ACCESS SYSTEMS, INC.
c/o CT Corporation System
1108 E. South Union Avenue
Midvale, UT 84047

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Michael E. Jones
POTTER MINTON
110 N. College
500 Plaza Tower

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: **4/28/17**

David A. O'Toole

Signature of Clerk or Deputy Clerk

Civil Action No. 6:17cv237

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* ______________________

was received by me on *(date)* ______________ .

❐ I personally served the summons on the individual at *(place)* ______________________

______________________ on *(date)* ______________ ; or

❐ I left the summons at the individual's residence or usual place of abode with *(name)* ______________

______________________ , a person of suitable age and discretion who resides there,

on *(date)* ______________ , and mailed a copy to the individual's last known address; or

❐ I served the summons on *(name of individual)* ______________________ , who is

designated by law to accept service of process on behalf of *(name of organization)* ______________

______________________ on *(date)* ______________ ; or

❐ I returned the summons unexecuted because ______________________ ; or

❐ Other *(specify)*:

My fees are $ ________ for travel and $ ________ for services, for a total of $ 0.00 .

I declare under penalty of perjury that this information is true.

Date: ______________

____
Server's signature

____
Printed name and title

____
Server's address

Additional information regarding attempted service, etc:

Print | Save As... | Reset